

EXHIBIT 17

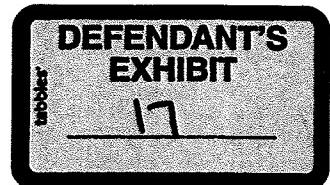
July 6, 2015 3:8 PM

USMLE Candidate Score Inquiry List

1 of 1

Name: Katz, Richard Denis
USMLE ID: 0-631-475-1
DOB:
SSN:

Agency Code	Exam	Regist Status	Registration Status Date	Exam Completion Status	Score Status	Pass	Fail	Three Digit Score	Two Digit Score
ECFMG	Step 1 06/01/2013 - 11/30/2013	C	12/07/2012	C	A	F		182	
ECFMG	Step 1 09/01/2012 - 11/30/2012	C	03/26/2012	C	A	F		185	
ECFMG	Step 2 CS 04/19/2012 - 04/19/2012	C	04/19/2012	C	A	F			
ECFMG	Step 1 12/01/2011 - 02/29/2012	C	11/18/2011	C	A	F		179	
ECFMG	Step 2 CS 09/14/2010 - 09/14/2010	C	09/14/2010	C	A	F			
ECFMG	Step 1 09/01/2010 - 11/30/2010	C	09/14/2010	C	A	F		145	
ECFMG	Step 2 CK 09/01/2010 - 11/30/2010	C	09/14/2010	C	A	F		140	
ECFMG	Step 2 CK 04/01/2006 - 09/30/2006	C	06/02/2005	C	A	F		141	
ECFMG	Step 2 CS 03/14/2006 - 03/14/2006	C	06/02/2005	C	A	F			
ECFMG	Step 1 04/01/2005 - 06/30/2005	C	02/25/2005	C	A	F		174	
ECFMG	Step 2 CK 10/01/2004 - 03/31/2005	C	08/12/2004	C	A	F		160	
ECFMG	Step 1 09/01/2004 - 02/28/2005	C	08/11/2004	C	A	F		176	
ECFMG	Step 1 04/01/2003 - 09/30/2003	C	02/20/2003	C	A	F		152	
ECFMG	Step 1 09/01/2002 - 11/30/2002	C	08/07/2002	C	A	F		135	
ECFMG	Step 1 10/01/2001 - 03/31/2002	C	09/14/2001	C	A	F		133	



NBM/Katz 0214

<input type="button" value="File"/> <input type="button" value="H"/> <input type="button" value="H"/>		<input type="text" value="USMLE ID: 0-681-475-1"/> <input type="button" value="Print"/>	<input type="button" value="Copy Data"/> <input type="button" value="CIBIS Search"/> <input type="button" value="Return To Prior Search"/>				
<input style="width: 100px; height: 20px; vertical-align: middle;" type="text" value="DOB: "/> <input style="width: 100px; height: 20px; vertical-align: middle;" type="text" value="SSN: "/>		<input style="width: 150px; height: 20px; vertical-align: middle;" type="text" value="Exam Request ID: "/> <input type="button" value="Execute Query"/>	<input type="button" value="Find USMLE ID"/>				
<p>Score Info Med School History Biographics (Exam Request Specific)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <p>Exam: STEP1 Last Name: Katz Rest of Name: Richard Denis SSN: NID: Medical School: 166020 - St. Matthew's University School of Medicine (Be School Start Date: Deceased? Deceased Date:</p> </td> <td style="width: 50%; text-align: center;"> <p>Suffix: DOB: School End Date: Deceased Date:</p> </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <p>Multiple Ethnicities</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1. American Indian/Alaska Native <input type="checkbox"/> 2. Asian <input type="checkbox"/> 3. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> 4. Hispanic or Latino <input type="checkbox"/> 5. Black or African American <input type="checkbox"/> 6. White <input type="checkbox"/> 7. Other <input type="checkbox"/> 8. Do not wish to respond </td> </tr> </table>				<p>Exam: STEP1 Last Name: Katz Rest of Name: Richard Denis SSN: NID: Medical School: 166020 - St. Matthew's University School of Medicine (Be School Start Date: Deceased? Deceased Date:</p>	<p>Suffix: DOB: School End Date: Deceased Date:</p>	<p>Multiple Ethnicities</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1. American Indian/Alaska Native <input type="checkbox"/> 2. Asian <input type="checkbox"/> 3. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> 4. Hispanic or Latino <input type="checkbox"/> 5. Black or African American <input type="checkbox"/> 6. White <input type="checkbox"/> 7. Other <input type="checkbox"/> 8. Do not wish to respond 	
<p>Exam: STEP1 Last Name: Katz Rest of Name: Richard Denis SSN: NID: Medical School: 166020 - St. Matthew's University School of Medicine (Be School Start Date: Deceased? Deceased Date:</p>	<p>Suffix: DOB: School End Date: Deceased Date:</p>						
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<p>Address1: 90-50 Union Turnpike 18-H Address2: Address3: Address4: Glendale , NY 11385 Country: 099 - United States including PR, VI, Guam</p> <p>Day Phone: Email: Gender: Male</p> <p>Citizenship: 099 - United States including PR, VI, Guam Ethnic: 05 - White (not of Hispanic origin)</p> <p>English First Language:</p>							

15

Registration records count

Medical School History records count

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USMLE Score Inquiry

File

[Copy Data](#)[Print](#)USMLE ID: 0-631-476-1 Katz, Richard Denis

DOB:

SSN

Execute Query	CIBIS Search	Return To Prior Search
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[Score Info](#) | [Med School History](#) | [Biographics \(Exam Request Specific\)](#)

Agency	Document Type	Medical School	School Start Date	School Date
ECFMG	Examinee, formatted	St. Christopher Iba Mar Diop College Of Medicine		
ECFMG	Examinee, formatted	St. Matthew's University School of Medicine (Belize)	01/2004	



Registration records count:15 Medical School History records count:15

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 USMLE Score Inquiry

File



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CIBIS Search

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USMLE ID: 0-631-475-1 Katz, Richard Denis

DOB:

SSN:

Score Info | Med School History | Biographics (Exam Request Specific)

Agency	Exam	Reg. Stat	Score Available Date	Load Scores Flag	Score Status	Exam Comp. Status	Inreg. Stat	Indet. Flag	P/F	3 Digit Score	2 Digit Score	Sc Ar F
ECFMG	Step 1 09/01/2010 - 11/30/2010	C	11/10/2010	Y	A	C	N	N	F	145		
ECFMG	Step 2 CK 09/01/2010 - 11/30/2010	C	12/8/2010	Y	A	C	N	N	F	140		
ECFMG	Step 2 CK 04/01/2006 - 09/30/2006	C	10/25/2006	Y	A	C	N	N	F	141		
ECFMG	Step 2 CS 03/14/2006 - 03/14/2007	C	4/25/2007	Y	A	C	N	N	F			
ECFMG	Step 1 04/01/2005 - 06/30/2005	C	5/26/2005	Y	A	C	N	N	F	174		
ECFMG	Step 2 CK 10/01/2004 - 03/31/2005	C	4/27/2005	Y	A	C	N	N	F			
ECFMG	Step 1 09/01/2004 - 02/28/2005	C	1/19/2005	Y	A	C	N	N	F	160		
ECFMG	Step 1 04/01/2003 - 09/30/2003	C	10/22/2003	Y	A	C	N	N	F	176		
ECFMG	Step 1 09/01/2002 - 11/30/2002	C	11/20/2002	Y	A	C	N	N	F	152		
ECFMG	Step 1 10/01/2001 - 06/31/2002	C	4/17/2002	Y	A	C	N	N	F	135		
										133		

Score Description: Failed Exam

Registration Status Date: 09/14/2001
Region: United States and Canada
Testing Location: 01-4215 Westbury, NY

Exam Date: 3/27/2002

Outcome Receive Date: 03/28/2002
Exam Request ID: 356495

Score Report Date: 4

4

34/17/2002

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